

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Form C-104
Revised August 1, 2011

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit one copy to appropriate District Office

RECEIVED
MAY 16 2019

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address COG Operating LLC 2208 W. Main Street Artesia, NM 88210		² OGRID Number 229137
		³ Reason for Filing Code/ Effective Date NW
⁴ API Number 30 - 025-44746	⁵ Pool Name Bobcat Draw; Upper Wolfcamp	⁶ Pool Code 98094
⁷ Property Code 321209	⁸ Property Name Dominator 25 Federal Com	⁹ Well Number 710H

II. ¹⁰ Surface Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
N	25	25S	33E		280	South	2032	West	Lea

¹¹ Bottom Hole Location

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
C	25	25S	33E		203	North	1763	West	Lea

¹² Lse Code P	¹³ Producing Method Code F	¹⁴ Gas Connection Date 4/2/19	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
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III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
	Alpha Crude Connector Pipeline	O
298751	Energy Transfer 2001 Bryan Street Ste 3700 Dallas, TX 75201	G
278421	Holly Refining and Marketing Company PO Box 159 Artesia, NM 88210	O

IV. Well Completion Data

²¹ Spud Date 8/30/18	²² Ready Date 4/2/19	²³ TD 17,600'	²⁴ PBDT 17,531'	²⁵ Perforations 12,927-17,506'	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
14 3/4"	10 3/4"	1174'	1000		
9 7/8"	7 5/8"	11801'	2300		
6 3/4"	5 1/2"	17600'	1400		
	2 7/8"	11411'			

V. Well Test Data

³¹ Date New Oil 4/2/19	³² Gas Delivery Date 4/2/19	³³ Test Date 4/2/19	³⁴ Test Length 24 Hrs	³⁵ Tbg. Pressure 1900#	³⁶ Csg. Pressure 1700#
³⁷ Choke Size 23/64"	³⁸ Oil 198	³⁹ Water 879	⁴⁰ Gas 179	⁴¹ Test Method Flowing	

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Amanda Avery*

Printed name:
Amanda Avery

Title:
Regulatory Analyst

E-mail Address:
aavery@concho.com

Date:
5/13/19

Phone:
575-748-6962

OIL CONSERVATION DIVISION	
Approved by:	<i>[Signature]</i>
Title:	Petroleum Engineer
Approval Date:	05/23/19

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

HOBBS OCD
MAY 16 2019
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5. Lease Serial No.
NMNM121958

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
DOMINATOR 25 FEDERAL COM 710H

9. API Well No.
30-025-44746

10. Field and Pool or Exploratory Area
WILDCAT; WOLFCAMP

11. County or Parish, State
LEA COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
COG OPERATING LLC
Contact: AMANDA AVERY
E-Mail: aavery@concho.com

3a. Address
2208 W MAIN STREET
ARTESIA, NM 88210

3b. Phone No. (include area code)
Ph: 575-748-6940

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 25 T25S R33E Mer NMP SESW 280FSL 2032FWL
32.095024 N Lat, 103.528034 W Lon

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Hydraulic Fracture
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

11/15/18 Test annulus to 1500# Set CBP @ 17,531' and test csg to 11,113#. Good test.

12/21/18 to 1/6/19 Perf 12,927-17,506' (832). Acdz w/41,160 gal 7 1/2%; frac w/ 9,358,074# sand & 8,115,954 gal fluid.

1/14/19 - 1/15/19 Drilled out CFP's. Clean down to PBTD @17,531'.

1/21/19 - 1/25/19 Set 2 7/8" 6.5# L-80 tbg @ 11,411' packer @ 11,401'. Installed gas lift system.

4/2/19 Began flowing back & testing. Date of first production.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #465016 verified by the BLM Well Information System For COG OPERATING LLC, sent to the Hobbs

Name (Printed/Typed) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission) Date 05/13/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

HOBBS OCD

Form 3160-4
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

MAY 16 2019

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT

RECEIVED

5. Lease Serial No.
NMNM121958

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No.
DOMINATOR 25 FEDERAL COM 710H

9. API Well No.
30-025-44746

10. Field and Pool, or Exploratory
WILDCAT; WOLFCAMP

11. Sec., T., R., M., or Block and Survey
or Area Sec 25 T25S R33E Mer NMP

12. County or Parish
LEA

13. State
NM

17. Elevations (DF, KB, RT, GL)*
3336 GL

18. Total Depth: MD 17600 TVD 12774

19. Plug Back T.D.: MD 17531 TVD 12774

20. Depth Bridge Plug Set: MD 17531 TVD 12774

22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No Yes (Submit analysis)

1a. Type of Well Oil Well Gas Well Dry Other

b. Type of Completion New Well Work Over Deepen Plug Back Diff. Resvr.
Other _____

2. Name of Operator
COG OPERATING LLC

Contact: AMANDA AVERY
E-Mail: aavery@concho.com

3. Address 2208 W MAIN STREET
ARTESIA, NM 88210

3a. Phone No. (include area code)
Ph: 575-748-6940

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At surface SESW Lot N 280FSL 2032FWL 32.095024 N Lat, 103.528034 W Lon

At top prod interval reported below SESW Lot N 280FSL 2032FWL 32.095024 N Lat, 103.528034 W Lon

At total depth NENW Lot C 203FNL 1763FWL 32.108207 N Lat, 103.528906 W Lon

14. Date Spudded
08/30/2018

15. Date T.D. Reached
09/19/2018

16. Date Completed
 D & A Ready to Prod.
04/02/2019

18. Total Depth: MD 17600 TVD 12774

19. Plug Back T.D.: MD 17531 TVD 12774

20. Depth Bridge Plug Set: MD 17531 TVD 12774

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)

22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit analysis)
Directional Survey? No Yes (Submit analysis)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
14.750	10.750 L80	45.5	0	1174		1000		0	
9.875	7.625 L80	29.7	0	11801	5107	2300		0	
6.750	5.500 P110	23.0	0	17600		1400		0	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.875	11411	11401						

25. Producing Intervals

Formation	Top	Bottom*	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	12927	17506	12927 TO 17506		832	OPEN
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
12927 TO 17506	SEE ATTACHED

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
04/02/2019	04/02/2019	24	→	198.0	179.0	879.0			GAS LIFT
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
26/64	SI 1900	1700.0	→	198	179	879		POW	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)
ELECTRONIC SUBMISSION #465009 VERIFIED BY THE BLM WELL INFORMATION SYSTEM
** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	

29. Disposition of Gas(Sold, used for fuel, vented, etc.)
SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
RUSTLER	1045			RUSTLER	1045
TOP OF SALT	1406			TOP OF SALT	1406
BOTTOM OF SALT	4887			BOTTOM OF SALT	4887
LAMAR	5136			LAMAR	5136
BELL CANYON	5181			BELL CANYON	5181
CHERRY CANYON	6188			CHERRY CANYON	6188
BRUSHY CANYON	7797			BRUSHY CANYON	7797
BONE SPRING LIMESTONE	9283			BONE SPRING LIMESTONE	9283

32. Additional remarks (include plugging procedure):

1ST BONE SPRING 10284
2ND BONE SPRING 10869
3RD BONE SPRING 11923
WOLFCAMP 12379

33. Circle enclosed attachments:

- 1. Electrical/Mechanical Logs (1 full set req'd.)
- 2. Geologic Report
- 3. DST Report
- 4. Directional Survey
- 5. Sundry Notice for plugging and cement verification
- 6. Core Analysis
- 7. Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

Electronic Submission #465009 Verified by the BLM Well Information System.
For COG OPERATING LLC, sent to the Hobbs

Name (please print) AMANDA AVERY Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission) Date 05/13/2019

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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